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01 FC:2501 700.00 DA
 02 FC:1504 300.00 DA
 03 FC:8001 15.00 DA

Mark D. Passler (Depositor's Name)
 (Signature)
 11-1-06 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/721,987	11/25/2003	Hikmet Kuran	9660-4	6982

TITLE OF INVENTION: BRAZIER GRILL AND A BRAZIER

APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	12/05/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
ALEXANDER, REGINALD	1761	099-445000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)

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Authorized Signature Mark D. PasslerDate 11-1-06Typed or printed name Mark D. PasslerRegistration No 40,764

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PTO/SB/21 (02-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/21,987	
	Filing Date	November 25, 2003	
	First Named Inventor	KURAN	
	Art Unit	1761	
	Examiner Name	ALEXANDER, REGINALD	
Total Number of Pages in This Submission	2	Attorney Docket Number	9660-4

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) PTOL-85B
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Mark D. Passler, Registration No. 40,784 Akerman Senterfitt		
Signature			
Date	11-1-06		

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Typed or printed name	Mark D. Passler		
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